

CONNIE KITTRELL, RECORDER City of Gallatin 132 West Main Street Gallatin, TN 37066

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City of Gallatin Beer Permits

The City Recorder's Office is responsible for all beer permits located within the city limits of Gallatin. The attachment is a helpful guide to assist you in the process of obtaining a beer permit and opening a business.

Please complete all questions on the application accurately and truthfully. Any applicant making false statement in the application shall forfeit his/her permit and shall not be eligible to receive any permit for a period of ten years.

The Gallatin Beer Board meets on the third Thursday of each month at 8:00 AM in City Hall. All completed applications are due in the Recorder's Office at least ten business days before the scheduled meeting.

The beer board requests that the applicant or representative be present at the board meeting. You will be informed by the City Recorder's office when to appear.

Beer Permit Process

- 1. Obtain application from City Recorder's Office
- 2. Secure compliant location
- 3. Return completed application at least ten business days prior of the next scheduled beer board meeting
- 4. Pay \$250.00 non-refundable fee
- 5. Background investigation conducted by the Gallatin Police Department
- 6. Life Safety inspection completed of premises
- 7. Representative or applicant present at meeting
- 8. Prorated privilege beer and/or alcohol tax payable when license approved
- 9. Obtain business license for location

If you have any questions, please call the Recorder's Office at 615-451-5893.

CONNIE W. KITTRELL

CITY OF GALLATIN 132 WEST MAIN STREET GALLATIN, TN 37066

ALCOHOL and BEER INFORMATION SHEET

Name of Business: _		***************************************			
Business Address:			Business Phone:		
Name of Applicant:		Date	e of Birth:	Place of Birth:	
Height:	Weight:	Sex:	Hair Color:	Eye Color:	
Social Security #:			Driver License #	<u> </u>	
Residential Address:	***************************************		Resident	ial Phone #:	
Previous Residential	Address:				
Previous Employmen	nt:				
Previous Employmen	nt Address:				
Have you ever been a	arrested?				
If you have been arre	sted please list dates of	f arrest, charges, lo	ocation of arrest and	disposition:	
I verify that the fo	oregoing statements	s are true and ac	curate to the best	t of my knowledge and belief.	
SIGNATURE OF	APPLICANT	,		DATE	<u></u>
******	• • • • • • • • • •		· • • • • • • • • • •	· • • • • • • • • • • • • • • • • • • •	.
		FOR C	FFICE USE		
An Invest	igation has been con	npleted at the Ga	llatin Police Depar	tment	
By:					
		_			
Chief of F					

Premises Checked:

APPLICATION FOR A BEER PERMIT STATE OF TENNESSEE CITY OF GALLATIN

APPLICATION FOR (CHECK ONE):

 ON PREMISES PERMIT(Restaurant, Tavern)
OFF PREMISES PERMIT(Store, Convenience Market

I HEREBY MAKE APPLICATION FOR A PERMIT TO SELL, STORE, MANUFACTURE, OR DISTRIBUTE BEER UNDER THE PROVISIONS OF TENNESSEE CODE ANNOTATED SECTION 57-5-101 ET SEQ. AND BASE MY APPLICATION UPON THE ANSWERS TO THE FOLLOWING QUESTIONS:

FULL NAMI	E OF APPLICAN	T(OWNER OF BUSINESS:	
TYPE OF AI	PPLICANT(CHE	CK ONE):	
PERSON	FIRM	CORPORATION	JOINT-STOCK COMPANY
LIST ALL PI LEAST A 5%	ERSONS, FIRMS 6 OWNERSHIP	INTEREST IN THE BUSIN	
WHAT IS YO	OUR PRESENT 1		
PREVIOUS A	ADDRESS(ES)(V	VITHIN LAST TEN YEARS):
DATE OF BI BUSINESS T	RTH: ELEPHONE NU	HOME T	ELEPHONE NUMBER:
			ге?
GIVE BUSIN	ESS ADDRESS	AND TELEPHONE NUMBE	ER:
NOTICES			RSON TO RECEIVE ANNUAL TAX
GIVE NAME BUSINESS O	****	OF REAL ESTATE (PROF	PERTY OWNER IF OTHER THAN
GIVE NAME	, DATE OF BIR	TH AND ADDRESS OF ANY	Y MANAGER OTHER THAN APPLICANT:
IN RESPONS CONVICTED CRIME(OTH	SE TO QUESTIO OOF ANY VIOLA IERTHAN MINC PARTICULARS	N 11, OR ANY OTHER EM ATION OF THE BEER OR A	HIP INTEREST, ANY MANAGER LISTED PLOYEE OF THE BUSINESS, BEEN ALCOHOLIC BEVERAGE LAWS OR ANY S) WITHIN THE LAST TEN YEARS?RT, AND DATE

WHY:	ENNESSEE?	IF SO, SPECIF	EVOKED, SUSPENDED Y, WHERE, WHEN, AN
GIVE THE NAME, RELATIONSHI FORMER BEER PERMITTEE AT	P TO APPLICAN	NT (IF APPLICABLE) A N:	AND ADDRESS OF THE
WHAT IS THE NAME AND ADDRI NEAREST TO YOUR BUSINESS?_	ESS OF THE CH	URCH (OR OTHER PL	ACE OF WORSHIP)
WHAT IS THE NAME AND ADDRI	ESS OF THE SCI	HOOL NEAREST TO Y	OUR BUSINESS?
I CERTIFY THAT I AM KNOWLEDC MINORS AND THAT THIS APPLICA KNOWLEDGE AND BELIEF. I AM A MY PERMIT SHALL BE REVOKED OR INTERFERES WITH SCHOOLS, OTHERWISE INTERFERES WITH PI	ATION CONTAIN ALSO AWARE T IF MY BUSINES CHURCHES, OR	IS TRUE INFORMATION HAT I SHALL NOT BE I S LOCATION CAUSES T OTHER PLACES OF PU	N TO THE BEST OF MY SSUED A PERMIT OR FRAFFIC CONGESTION BLIC GATHERING, OR
SIGNATURE OF APPLICANT/OWN	ER (OR AUTHOR	IZED CORPORATE OF	FICER)
SWORN TO AND SUBSCRIBED BEF	FORE ME THIS _	DAY OF	,20
NOTARY PUBLIC			
MY COMMISSION EXPIRES:			
APPLICANT MAKING FALSE STAT	EMENT IN THIS	APPLICATION SHALL	FORFEIT HIS PERMIT
APPLICANT MAKING FALSE STAT AND SHALL NOT BE ELIGIBLE TO A PRIVILEGE TAX OF \$100 IS IMPO STORING OR MANUFACTURING B SUCCESSIVE JANUARY 1. ANY HO	EMENT IN THIS RECEIVE ANY I DSED ON THE BU EER IN THIS STA DLDER OF A BEI	APPLICATION SHALL PERMIT FOR A PERIOD JSINESS OF SELLING, I ATE EFFECTIVE JANUA ER PERMIT ISSUED AF	FORFEIT HIS PERMIT OF TEN YEARS. DISTRIBUTING, ARY 1, 1994 AND EACH TER JANUARY 1, 1994
NOTICE: A NON-REFUNDABLE \$25 APPLICANT MAKING FALSE STAT AND SHALL NOT BE ELIGIBLE TO A PRIVILEGE TAX OF \$100 IS IMPO STORING OR MANUFACTURING B SUCCESSIVE JANUARY 1. ANY HO SHALL PAY A PRO RATA PORTION	EMENT IN THIS RECEIVE ANY I DSED ON THE BU EER IN THIS STA DLDER OF A BEI	APPLICATION SHALL PERMIT FOR A PERIOD JSINESS OF SELLING, I ATE EFFECTIVE JANUA ER PERMIT ISSUED AF IAL TAX WHEN THE PE	FORFEIT HIS PERMIT OF TEN YEARS. DISTRIBUTING, ARY 1, 1994 AND EACH TER JANUARY 1, 1994
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